Application or Docket Numb	t Numbe	Docket	or	application	Δ
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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

		CLAIMS AS			LENTITY		OTHER				
(Column 1) (Column 2)  FOR NUMBER FILED NUMBER EXTRA						TYPE		OR	SMALL		
		INOIVIDE	n riceo	HOWIDEN	LATINA	RATE	FEE		RATE	FEE	
BASIC FEE				- A	-	345.00	OR		690.00		
TOTAL CLAIMS / O minus 20= *							:	OR	X\$18=		
INDEPENDENT CLAIMS 2 minus 3 = *								OR	X78=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	+130=		OR	+260=				
* If the difference in column 1 is less than zero, enter "0" in column 2							-	OR	TOTAL	690	
	. CI	LAIMS AS A	MENDED	- PART II				•	OTHER THAN		
		(Column 1)	,	(Column 2)	(Column 3)	SMAL	L ENTITY	OR	SMALL	SMALL ENTITY	
AMENDMENT A	A CONTRACTOR OF THE PARTY OF TH	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**	=	X\$ 9=	:	OR	X\$18=		
AME	Independent		Minus	***	=	X39=		OR	X78=		
	FIRST PRESE	NIATION OF M	ULTIPLE DEPI	ENDENT CLAIM		+130=		OR	+260=		
BEST AVAILABLE COPY							AL .		TOTAL		
	•		AVAILAL			ADDIT. FE	E	1011	ADDIT. FEE	•	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(Column 1) CLAIMS	- ************************************	(Column 2) HIGHEST	(Column 3)		ADDI-	1 1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL	
NON	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	j.	
AME	Independent	<u> </u>	Minus	***	=	X39=		OR	X78=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIM		+130=		1	+260=		
						+130= TOT/		OR	TOTAL		
						ADDIT, FE		OR	ADDIT. FEE		
		(Column 1)		(Column 2)	(Column 3)	1		_	· .		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	•	Minus	**	=	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***	=	X39=		OR	X78=		
_	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIM				Un			
	f the entry in action	mn 1 in less thr= t	ho antorio anto-	on 2 write 40° in an	duma 2	+130=	i	OR	+260=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

## **Application or Docket Number**

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA											R THAN	
ΙŦ	OTAL CLAIMS	8	(Colum	n 1)	(Column 2)			TYPE				ENTITY
								RATE	FEE		RATE	FEE
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FE	370.00	OR	BASIC FEE	740.00
T	OTAL CHARGE	ABLE CLAIMS	m	minus 20=		*		X\$ 9=		OR	X\$18=	
<b> </b>	DEPENDENT (		<u></u>	ninus 3 =	*			X42=		OR	X84=	
M	JLTIPLE DEPE	NDENT CLAIM F	PRESENT			. 🗀		+140=		OR	+280=	
* 1	the difference	zero, enter	r "0" in d	column 2		TOTAL		OR	TOTAL	<u> </u>		
	(	CLAIMS AS	AMENDE	D - PAR	T II				L	<b>_</b>	OTHER	THAN
		(Column 1)		(Colur		(Column 3)	_	SMALL	ENTITY	OR	SMALL	
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	· 10	Minus	20		2		X\$ 9=	-	OR	X\$18=	
A	Independent	* Z	Minus	1 *** 3	CLAIN	-		X42≅		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  BEST AVAILABLE COPY									OR	<b>1</b> 280≑	
										OR	TOTAL ADDIT. FEE	
	•	(Column 1)		(Colun		(Column 3)		DDIT. FEE		• ′	ADDIT. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FÉE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	]	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM		J	+140=			+280=	
	•		•				L	TOTAL		OR	TOTAL	
		<b>10.1</b>					ΑC	DDIT. FEE		OR A	DDIT. FEE	
	•	(Column 1) CLAIMS		(Colum HIGHE		(Column 3)	-			-	<del></del>	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	Ĺ	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
A L	Independent	*	Minus	***		=	-	X42=		r	X84=	•
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If (	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
***	the "Highest Nun the "Highest Nun	nber Previously Pai nber Previously Pai per Previously Paid	d For" IN THIS d For" IN THIS	SPACE is I SPACE is I	ess than less than	20, enter "20." 3, enter "3."		TOTAL DIT. FEE			TOTAL DDIT, FEE nn 1.	
								•				1